Periscope

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1. *Spastic Paraplegia.*—Newmark makes a further report on two cases of familiar spastic paraplegia. The first report was made eleven years ago, and since that time the two affected members of the family, a brother and sister, have remained in about the same condition, although the girl, now twenty-seven years of age, thinks that walking is a little more difficult than it was in childhood. In a second family there were fourteen children; of these four died in childhood or infancy. Of the remaining children one developed slight stiffness of the legs at the age of 16; another at the age of 7½; a third at the age of 8, after an infectious condition; a daughter between the ages of 11 and 19; another son at the age of 8; another daughter at the age of 6. Two sons, one of 14 and one of 10, and one daughter of 5 years, appeared to be normal, although the boy of 10 regarded himself as affected, and all three have active knee reflexes. That is, of the nine children who lived, six have signs of spastic paraplegia. In none of the cases were there disturbances of sensation, of the sphincters or of the intelligence. There was no history of cases in other generations of the family, and no cause, such as consanguinity of the parents, or the existence of infectious processes, could be determined. One of the sons suffering from marked spastic symptoms died of tuberculosis, and the examination of the central nervous system showed in the sacral and lower lumbar regions degeneration only of the pyramidal tract. In the middle lumbar region changes in the posterior columns began to appear. These occupied the median portion. In the dorsal region degeneration of the pyramidal columns diminished upward. The sclerosis of the median posterior columns became intense. In the cervical portion there was no degeneration of the lateral columns, but the median and posterior columns remained sclerosed. The cerebellar lateral tracts were not involved, but the cells in Clarke's columns were diminished in number and shrunken. There was also hydropic degeneration in the fibers in the columns adjacent to the sclerosed areas, which he regards as an exogenous complication of the primary systematic degenera-

tion of the lateral and posterior columns. He describes the changes found in the nervous system by other investigators.

2. *Cysticeri in the Human Brain.*—A man of thirty-seven, with symptoms of chronic nephritis, complained of severe headache. At the autopsy the convolutions and sulci of the brain were normal; all the ventricles were distended; there were evidences of inflammation; and in the left ventricle there was a yellowish bladder-like body containing the head of a parasite. A woman twenty-four years of age had pain in the right lower portion of the abdomen, and vomiting. Appendicitis and peritonitis were diagnosed, an operation performed, and the patient died. Just behind the optic chiasm a calcified cysticercus was found. A man of nineteen had had gastric disturbance and occasionally headache. Hyperchlorhydria was determined, he suddenly developed temperature and intense headache, and died with symptoms of respiratory paralysis. A cysticercus in the fourth ventricle was suspected, and a collapsed cysticercus was actually found in that situation. The ependyma was thickened. A man of forty-three had had headache for twenty years. There was some stiffness in the back of the neck, but no other indications of nervous lesion. The headache continued to be intense, and the patient died suddenly without apparent cause. A doubtful diagnosis of cerebellar tumor was made. At the autopsy the floor of the third ventricle was bulging, the ventricle was distended. and the fourth ventricle contained a great translucent, adherent mass which was found to be a cysticercus containing a dead, calcified parasite. In all these cases microscopical examination of the ependyma showed the presence of granulation tissue, extending deeply into the nervous substance, and containing numbers of giant cells. Sato has collected the statistics of this condition, and found 76 per cent. of all the cases occur in men. The great majority are found in patients between the ages of 30 and 60 (82 of 102 cases, or 80 per cent.). He recognizes four forms of the cysticercus racemosus; one in which the bladders are irregular; one in which there are two or more variously sized cysts; one (the acinous form) in which the projections from the cysts are sharply limited, the different bladders appearing as stalked berries; and one in which the cysts are clustered together like grapes. The different types may occur in a single case. Symptoms of brain irritation such as convulsions, occur almost exclusively when the cysticercus is located at the periphery. There may be no clinical symptoms. In other cases there is headache, or epilepsy, with disturbance of intelligence. Sometimes the symptoms of brain tumor appear. In 31 of the 128 cases epileptic symptoms were present. In 48 cases the ventricles were involved. The symptoms were headache, vertigo, and very frequently sudden death, particularly if the cysticercus was in the fourth ventricle. In 24 cases the cysticercus was situated at the base of the brain, or in the cerebellum. These patients suffered from headache, vomiting, vertigo, and sometimes lesions of the cranial nerves. The diagnosis, at present, can only be made with likelihood, not certainty.

3. *Tears and Facial Paralysis.*—Schreiber, after discussing the literature of the subject, reports a series of cases of facial paralysis, all characterized by loss or diminution of the secretion of tears. In addition there was diminution of the electro-cutaneous, touch, pain and temperature senses upon the affected side, and in the third case the patient had hyperacousis, and complained of tinnitus in the ear on the same side; and the left (paralyzed) side of the tongue, and the mucous membranes of the left side of the mouth were dryer than on the unaffected side. This patient had had bilateral inflammation of the middle ear one year before the paralysis developed. Schreiber analyzes the published cases, and agrees with Goldzieher that the facial nerve probably controls the secretion of tears. In reference to the taste sense, Schreiber is inclined to agree with Erb, that the anterior two-thirds of the tongue are supplied by the trigeminus, and the posterior third by the glosso-pharyngeus. In 58 cases of peripheral facial paralysis that Schreiber has personally observed, he found 26 dis-

turbances of sensation. This is probably due to the fact that fibers pass from the ascending root of the trigeminus into the facial nerve, for which there is anatomical proof.

4. *Cholin in Epilepsy.*—Donath has made careful chemical and microscopical studies of the cerebrospinal fluid obtained by lumbar puncture from epileptics. He finds that it contains cholin, and that this cholin is capable of producing violent convulsions in animals. The method was as follows: The fluid obtained under sterile conditions was neutralized with HCl, dried over the water-bath to a brownish mass, and extracted with absolute alcohol which dissolved the cholin chloride, but not the alkaline salts of HCl. The cholin chloride was then precipitated with platinum chloride, as a cholin-chloro-platinate. This was recognized by its solubility in cold water, and the characteristic microscopical crystalline forms. Donath has subjected 64 cases of various forms of nervous disease, which included 22 of epilepsy, to this investigation. Of these 22 cases 19 showed cholin. Of the other cases the organic forms of nervous disease showed it in a large proportion of cases, indicating a degeneration of the nervous tissue, increased liberation of lecithin, and the separation from it of the cholin. It appears, although it is not certain, that the amount of cholin is proportional to the severity of the disease process. Among the other constituents the most important, from the standpoint of quantity, is sodium chloride, also ammonium chloride, phosphoric acid, rarely, lecithin, and frequently a substance which reduces copper. Donath does not decide whether this is sugar or pyro-catechin. Cholin was not found in the blood or urine of these cases. Injected into the cortex of the brain, or beneath the dura in animals, cholin produces severe tonic and clonic spasms, often leading to paralysis. Control experiments performed with sodium chloride solutions were negative. The paper is concluded with a review of the literature upon the physiological action of cholin.

5. *Gangrene of Extremities.*—Nine days after convalescing from an attack of pneumonia a woman of twenty-nine developed cutaneous hemorrhages upon the skin of the hands and forearms. Ten days later there was an attack of pain with a feeling of cold and tenderness in the fingers which became blue in color, and later swelled. Eight days later the edges of the ears were also involved, and three days after this the toes also. Ramification of the terminal phalanges of the fingers and toes occurred, and finally separation. The case corresponds to Raynaud's disease, the only difference being the existence of a distinct etiological factor preceding the attack of pneumonia.

6. *Tabetic Foot.*—Idelsohn reports a case of slowly progressive tabes in a man who died at the age of 73. There was a typical tabetic foot with the characteristic proliferation of the bone at the epiphyses and the porosity of the bones of the tarsus which are characteristic of tabetic arthropathies. There was also arterial sclerosis. Over the exostoses there were alterations in the skin. In discussing the etiology of this condition he does not believe that it is due to a peripheral neuritis; otherwise it would be exceedingly common.

7. *Investigations by Reflexometer.*—Büdingen gives a careful description of his reflexometer, which is entirely too complicated to be reproduced in an abstract, but which consists essentially in a table upon which the patient sits, a movable wire frame, which rests against the shin, and to which weights can be attached, a board hinged to the surface of the table which can be held at any desired angle to support the leg, and a complicated striking apparatus by means of which a blow of definite force can be struck upon the patellar tendon. He withholds statistics obtained by investigations with this instrument, but describes curious results obtained in two cases of transverse myelitis in which the Babinski phenomenon was present. In the first of these, a man of sixty-three, with slow development of the symptoms, he observed that the excursion of the leg in testing the knee jerk commences with a certain definite value, and

then, upon continued testing, steadily increased. If a pause in the testing was made the excursion returned to the initial value, and again increased. Galvanization of the leg had no effect upon the reflex.

8. *Hematomyelia.*—A man of sixty-eight had loss of the tendon reflexes in the legs, and there was also a complete anesthesia from the level of the tenth dorsal spine. There was paralysis of the bladder and rectum. At the autopsy there was found a bronchial carcinoma in the left lung, with metastasis to various parts of the body. Upon examination of the hardened specimen a huge hemorrhage into the substance of the spinal cord was found, extending from the second dorsal segment to the lumbar region, where it surrounded a metastatic nodule. Below the lumbar region there was diffuse bloody infiltration of the cord. Curiously enough there was no distinct secondary degeneration in the cord, although there was some swelling of the axis cylinders. The blood vessels were normal. It appears, therefore, that the hemorrhage was due to the metastatic nodule.

SAILER.

Allgemeine Zeitschrift für Psychiatrie

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1. Heinrich Laehr. DE GRUYTER.
2. Heinrich Laehr. PELMAN.
3. Symptomatology of Dementia Præcox. ALBRECHT.
4. The Psychology of the Symptom of Rhythmic Accentuation in Insanity. FAUSER.
5. Late Epilepsy in the Course of Chronic Psychoses.
6. Korsakow's Psychosis, with Marked Improvement in the Severe Polyneuritic Symptoms. TEGTMEYER.
7. Contribution to the Clinic of Psychoses in Children. GOTTGETREU.
8. The Relation Between Involution Psychoses and Juvenile Dementia. LOMER.
9. Melancholia and Depression. THALBITZER.
10. The Determination of the Capacity of the Cranial Cavity in the Dead Body. REICHARDT.

1. *Heinrich Laehr.*

2. *Heinrich Laehr.*—Two obituary notices to the late Dr. Laehr, who died at the age of eighty-five years, on Aug. 18, 1905.

3. *Symptomatology of Dementia Præcox.*—The author examining the material admitted to the Treptow Asylum from April, 1900, to April, 1904, finds among 693 admissions, 202 cases of dementia præcox, or 29 per cent. He has chosen these carefully, according to Kraepelin's standards, leaving out all doubtful cases, and gives here an analysis of their time of onset symptoms and termination, grouping them under the three forms, hebephrenia, katatonia and dementia paranoides. His figure, 29 per cent. of total admissions, as against 14 per cent. of total admissions given by Kraepelin, he explains as mainly due to the difference of material in a provincial asylum and in a university clinic, but also partly to racial differences. The percentage for males alone was 28 per cent.; that for females alone 30 per cent. Hereditary tare was present in 56 per cent. of his cases.

As to forms of dementia præcox, there were hebephrenia, 56 cases (30 males, 26 females), or 8 per cent.; katatonia, 64 cases (29 males, 35 females), or 90 per cent.; dementia paranoides, 82 cases (28 males, 44 females), or 12 per cent. An external exciting cause was found in only 4.5 per cent. of his cases. Criminal offences were committed by 18 patients (9 per cent.), 53 per cent. of the cases began before the age of twenty-five years. The onset was marked by depression in 55 per cent. of the cases, by mania in 10 per cent., undetermined in 34 per cent. A depressive first stage was commonest in katatonia, less frequent in dementia paranoides, and rarest in hebephrenia. Few of the cases presented simple mental failure. In the great majority there were more or less pronounced hallu-